

# THE REPORT

HEALTH SCIENCES ASSOCIATION OF BRITISH COLUMBIA

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APRIL 2016



## THE COST OF SHORTAGES

New equipment and facilities are promised.  
But what about the people to run them?

# TOWARDS A MORE ENGAGED UNION



## WE OFTEN FIND OUR GREATEST STRENGTH WHEN FACING ADVERSITY.

As a physiotherapist, I have seen people discover incredible resources inside themselves, and use them to overcome great odds. And I think every one of us working with patients and clients have seen this time and again.

People are tough and adaptable. Organizations can be too – if they listen to and engage the people they represent.

In the four decades since HSA was founded by a small number of professionals, we've seen our share of challenges.

In in the 1970s, not long after HSA came into existence, the government and employers took advantage of our "no strike" clause to push terms that threatened our new membership. We adapted, put strike action back on the table, and moved into a stronger negotiating position.

In the 1990s, the government's sweeping re-organization of the industrial bargaining model threatened to assign our members to other unions. We fought back, kept the professions we'd long represented, and adapted to the new landscape.

Now, we are threatened by the aggressive raiding tactics of another union.

Many of us work alongside RNs daily. They stand shoulder to shoulder with us, their professionalism, dedication and skill similar to that of HSA members.

Their union should do the same. But instead of standing shoulder to shoulder with HSA, they are

attacking us, raiding RPNs and now even non-nursing professions, affecting our daily work and weakening our ability to push for much needed improvements to the health care system itself.

It is no small threat. But it can – and will – make us stronger.

HSA has begun expanding our capacity for organizing. We must go further, deploying powerful new technology and spending more time with members at the worksite.

At the coming convention delegates will discuss plans to provide more support for stewards. They are the leaders in the workplace, and we must do more to help them assist, inspire and organize our members.

Organizing and engagement will make us stronger, because it will make our members stronger. Because it's not about telling people what to do, it's about helping people discover their own power to make a better world.

There is hard work ahead, but I am optimistic, and excited. The world is increasingly unpredictable and the security and strength of union membership is more important now than it has been in generations. A union that listens to and builds on the strength of its members has a great future.

Val Avery

“People are tough and adaptable. Organizations can be too – if they listen to and engage the people they represent.”

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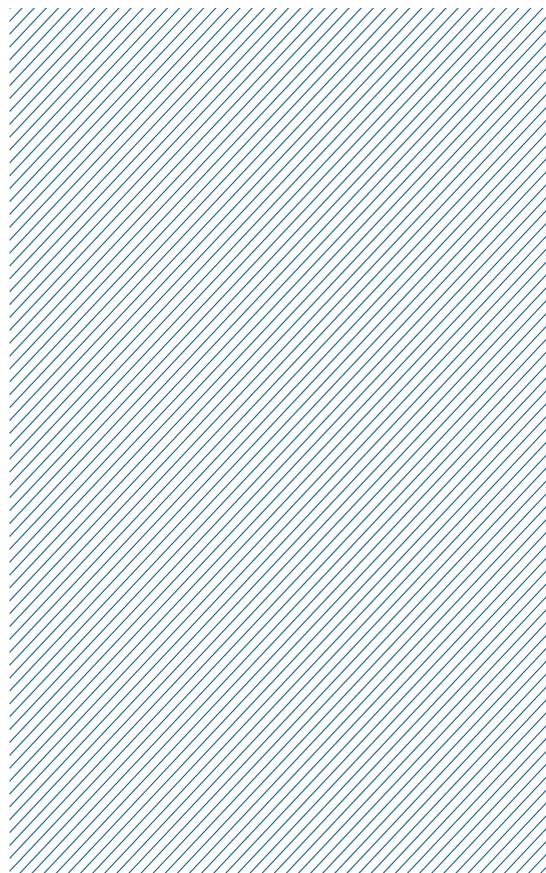
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 **Deborah Ezzy Bravo**  
Unlike · Reply · Message ·  3 · January 14 at 3:34pm

 **Deborah Cline** Thank you  
Like · Reply · Message ·  2 · January 14 at 5:23pm

 **Janice Morrison** We have a great team at HSA representing our members  
Like · Reply · Message ·  4 · January 14 at 7:38pm

 **Tara Ehrcke** Classy outfit!  
Like · Reply · Message ·  1 · January 14 at 10:16pm

 **Bev Banfield** Thank you. Best wishes.  
Unlike · Reply · Message ·  2 · January 15 at 7:43am

 **Health Sciences Association of British Columbia** Thank you, Bev, for your tenacity and advocacy on behalf of these members for so many years.  
Like · Reply ·  2 · Commented on by Miriam Sobrino [?] · January 15 at 8:43pm · Edited

 **Bev Banfield** You are all welcome. It was my pleasure to offer assistance.  
Like · Reply · Message · January 15 at 11:54pm

 Write a reply...  

 **Lon Wood** Hip hip . . . HSA!  
Unlike · Reply ·  1 · January 15 at 7:54pm

 **Kathy Green** Thank you for all your efforts and support for the women at this facility. Prayers sent for the women. This is such an important case. I hope this case will help move forward the importance of safe working environments for those dedicated in the service of helping others. Thank you HSA for posting. I look forward to reading more about the successful resolution to this.  
Like · Reply · Message ·  4 · January 16 at 3:31am

 **Johnny Bhullar** Thank you HSA for the fight! I trained with the folks at mission lab.  
Unlike · Reply · Message ·  2 · January 19 at 6:42pm

# FIGHTING FOR MEMBERS AT THE SUPREME COURT OF CANADA

## A CANCER CLUSTER IS FOUND

HSA members Katrina Hammer and Anne MacFarlane, and HEU member Patricia Schmidt, all worked in the laboratory at Mission Memorial Hospital. All three contracted breast cancer, and an investigation into the cancer identified there was a cancer cluster in the laboratory – where the incidence of breast cancer was eight times the rate of breast cancer in BC.

## THEIR CLAIMS ARE DENIED

Their claims to WorkSafe BC for compensation for breast cancer as an occupational disease were initially denied in each case, but the BC Workers' Compensation Appeal Tribunal (WCAT) reconsidered the decisions, and allowed the claims. WCAT reviewed all of the evidence before it, including expert reports that did not rule out occupational factors as a contributor to the cancer. It found that it was "sufficient to conclude it was as likely as not that some workplace exposure was of causative significance."

Fraser Health Authority, the employer, judicially reviewed the WCAT award and the BC Supreme Court and BC Court of Appeal sided with Fraser Health Authority, stating there was no evidence of work causation.

## HSA FIGHTS BACK

HSA sought, and received, leave from the Supreme Court of Canada to appeal the BC court decisions on the basis that the courts applied the wrong standard in their review of the WCAT decisions, and wrongly found that there was "no evidence" on which WCAT could have based its decision.

HSA lawyers Tonie Beharrell and Randy Noonan and HEU's Kaity Cooper appeared in the Supreme Court of Canada on January 14 to challenge the decision of the BC Supreme Court and BC Court of Appeal to overturn the WCAT decision.

At issue is the role and authority of administrative tribunals like the WCAT, which have specialized expertise in their particular area, and whether the courts ought to be able to dismiss that expertise and reweigh the evidence that was before the Tribunal.

In its submission to the Supreme Court of Canada, HSA argued that:

*"As noted by the original panel, the scientists and physicians were weighing the evidence against the standard required to reach "scientific conclusions" based on "scientific evidence." That is a significantly higher test than that required in the administration of the workers' compensation scheme for the adjudication of workplace disease claims, and in fact requiring the Appellants to meet that test would fundamentally undermine the purpose of that scheme."*

Jeanne Meyers, HSA's Executive Director of Legal Services and Labour Relations, said HSA's decision to pursue the case to the highest court in Canada was taken to support not just the members from Mission Memorial Hospital, but to uphold the integrity of the Workers' Compensation system, based on a historic compromise where employees gave up the right to sue employers, and in exchange employers provide a no-fault insurance scheme.

## CSS WAGE INCREASES DELIVERED APRIL 1

COMPARABILITY INCREASE OF 2.5 PER CENT HELPS BRING WAGES CLOSER TO THOSE PAID IN COMMUNITY HEALTH SECTOR

On April 1 the first of three compensation comparability wage increases for Community Social Services (CSS) workers took effect. This 2.5 per cent increase, combined with the Economic Stability Dividend of .45 per cent, results in an increase for all members covered by the Community Living Services and General Services collective agreements.

Compensation comparability has been one of HSA'S long-standing bargaining goals. Comparability is a process designed to compensate CSS workers at a closer pay rate to union members working in Community Health, who have historically been paid more for similar work.

HSA continues to meet with the employer association to determine the amount of future wage adjustments that are scheduled for April 1, 2017 and April 1, 2018. While future adjustments are not expected to be the same as this year's, HSA will keep members up to date when agreements have been reached.

Not all job classifications will be a part of the entire comparability process, but all CSS members will receive the initial 2.5 per cent raise.

Compensating CSS members fairly for the work that they do will help improve retention, leading to improved consistency of care for the individuals we work with.

## 2016 OHS CONFERENCE

JUNE 6-7

SHERATON VANCOUVER AIRPORT HOTEL

Highlights include:

- Panel presentation on workplace challenges and solutions.
- The planning and preparations needed to assist workplaces to respond before, during and after an emergency/disaster in order to reduce the effects.
- New legal requirements for accident and incident investigations.
- An update on provincial violence-prevention initiatives.
- Bullying and harassment.
- Claims, trends and prevention in mental injury, and an introduction to mental health first aid.
- CSA standards on psychological health and safety and updates on the Guarding Minds at Work program.
- Workshops on the information, training, and union supports needed to provide and improve mental injury tools

This conference is open to any HSA member representing the union on a Joint Occupational Health and Safety Committee and to HSA EDMP Representatives. Wage loss, travel and hotel costs will be covered according to HSA policies.

On-line registration at [hsabc.org/events](http://hsabc.org/events) is open until midnight, May 15, 2016.

### DATES FOR OHS STEWARD TRAINING IN 2016

Members are also encouraged to register for OHS training sessions scheduled throughout 2016. Dates, descriptions and registration can be found at [hsabc.org/events](http://hsabc.org/events).



(TOP L-R) ANNA MORTON, SARAH CHAPPLE, NANCY HAY, CHERYLEE HALE  
(BOTTOM L-R) DERRICK HOYT, JOE SEBASTIAN, KEVIN TOWHEY, SHIRLEY CLARKSON.

## REGIONAL DIRECTOR ELECTIONS

HSA MEMBERS IN REGIONS 2, 4, 6 AND 8 ARE CURRENTLY VOTING FOR THEIR REGIONAL REPRESENTATIVE TO THE BOARD OF DIRECTORS

The successful candidates will assume the position of regional director for a two-year term starting at the conclusion of HSA's 2016 annual convention. Results will be announced on the HSA web site shortly after the April 15 deadline for ballots.

HSA's board of directors meets at least quarterly, and directors take an active leadership role in representing the union. They receive wage replacement at their regular rate of pay for the time they spend in official meetings. Part-time and casual members are reimbursed as if they were at work during the meetings they attend. To be eligible, members must be employed in a chapter and have been a member of HSA for at least one year immediately prior to election.

### REGION 2

**Derrick Hoyt**, the current director, is a pathologist's assistant at Victoria's Royal Jubilee Hospital, is being contested by **Anna Morton**, a social worker at the Queen Alexandra Centre for Child Development.

### REGION 4

**Joseph Sebastian**, the current director, is a medical radiation technologist at Vancouver General Hospital, is being contested by **Sarah Chapple**, a social worker at Vancouver General Hospital.

### REGION 6

**Anita Bardal**, the current director, is stepping down. The position is being contested by **Shirley Clarkson**, a registered psychiatric nurse at St. Paul's Hospital, and **Nancy Hay**, a social worker at St. Paul's Hospital.

### REGION 8

**Allen Peters**, the current director, is stepping down. The position is being contested by

**Cherylee Hale**, a cardiology technologist at Kelowna General Hospital, and **Kevin Towhey**, a medical radiation technologist at Royal Inland Hospital.

### REGION 10

**Mandi Ayers** will return to represent HSA members in Region 10 on the HSA board of directors. She was acclaimed after the deadline passed with no further nominations.

Ayers has served on the Womens Rights, Education, Resolutions, and Constitutional and Organization Policy committees.

She is a long-time union activist, having served as chief steward, OHS steward, member-at-large (sitting on both the Resolutions and Education Committees), delegate to the bargaining proposal conferences, and an HSA representative on the Northern Health Authority Violence Prevention committee.

Her two-year term expires at the conclusion of the 2018 HSA convention.

## TOUGH NEW RULES ON FINGERPRINTING

CHANGES TO BC LAW WILL REQUIRE MORE EMPLOYEES TO SUBMIT MANDATORY FINGERPRINTS

The Criminal Records Review Act provides for mandatory fingerprinting for those employed by health authorities and who work with children or vulnerable adults. The program requires the employee to submit fingerprints to confirm identity if there is an applicant who has a match with two of the following three criteria: name, date of birth, and gender. The employee has to sign the authorization to provide fingerprints if required by the program. The employer is required to not allow the employee to work unless there is a records check - which may require the prints to ensure identity. The RCMP policy specifies that the fingerprints are destroyed after use and not retained for other purposes.

BC was the last province to put such policy into effect in 2013, and the extension of this program into the province has increased the number of people required to provide fingerprints.

In response to concerns raised by some members who have been through the process, HSA has investigated the policy.

HSA is not able to take action to shield members from these rules because the employer plays no role in the check itself, or in deciding when the fingerprints are needed, HSA is unable to challenge the matter under the provisions of the collective agreement or relevant labour relations legislation.

Any challenge would have to be against the legislation itself, or the application of the legislation in practice. Given the nature of the legislation and the limited

use of fingerprints by the RCMP, HSA's legal advice is that any court would find the legislation a reasonable manner of meeting its stated goal of protecting the vulnerable while ensuring the privacy of the person required to provide fingerprints. In other words, any legal challenge would be costly and unlikely to succeed.

While HSA is sympathetic to the frustration of members required to submit to this process, the union recommends compliance.

## AWP AND ICBC DO NOT MIX

IF YOU'RE PARTICIPATING IN AN ATTENDANCE WELLNESS PROGRAM (AWP) AND YOU HAVE AN ICBC CLAIM, HERE'S SOMETHING YOU NEED TO KNOW.

Employers should not be penalizing you for missing work when you have an ICBC claim. Some employers have been trying to connect these two separate matters.

If you're called into an AWP meeting or if there is a big increase in your sick leave - whether because of an ICBC claim or not - always take a steward to the meeting or get in touch with an HSA labour relations officer.



## HSA PHYSIOS PART OF AWARD-WINNING MOBILITY TEAM

Several HSA physiotherapists played an important role on an award-winning team from the Intensive Care Unit at Vancouver General Hospital.

In November, the team received the BC Quality Award for their work on the Up! Early Progressive Mobility Pathway initiative. Traditionally, the mobility of Intensive Care Unit (ICU) patients was considered unsafe due to a multitude of tubes, catheters, and monitoring devices. But current research has indicated that early mobilization provides many benefits to patients, including decreased length of hospital stay, reduced number of days on a ventilator, and improved muscle strength and function. The Up! initiative promotes best practices around early mobilization of ICU patients, assessing their mobility needs in a safe and efficient manner throughout their stay.

The Up! team received \$2,500 as part of their award. The team plans to put its \$2,500 towards education, equipment and resources to continue early mobilization of ICU patients not just in VGH, but also across Vancouver Coastal Health.

The photo features the Up! Early Progressive Mobility Pathway team, including HSA physiotherapists Jocelyn Ross PT (on the left), Hakim Yeung (fourth from the left, in scrubs), and Vikrum Roycombough (on the right, in scrubs).

PHOTO COURTESY OF VANCOUVER COASTAL HEALTH

# BCNU ATTEMPTS, FAILS TO CONTROL HIRING FOR NEW NURSING JOBS

## HSA FIGHTS AND WINS BATTLE TO ENSURE HIRING NOT RUN BY BCNU

IT TOOK PRESSURE FROM HSA, BUT RPNS NO LONGER HAVE TO CONTACT THE BCNU IF THEY WANT TO APPLY FOR NEW NURSING JOBS.

After the BC government announced new permanent nursing jobs in January, RPN members of HSA were at first encouraged to contact the BC Nurses' Union – and provide personal contact information – if they wanted to apply for the positions.

But after pressure from HSA, which has been supporting members concerned about the application process, the rules have changed. RPNs no longer have to contact BCNU if they want to apply.

Registered psychiatric nurse members of HSA are now advised to send their applications directly to HSA.

“HSA supports the impartial hiring of health professionals, including RPNs, to meet the health care needs of all British Columbians. We don't support putting individual unions in charge of hiring,” said Val Avery, president of HSA.

A number of HSA's RPN members complained about the confusion around BCNU's that they negotiated the creation of 1600 new nursing jobs. Part of the confusion was related to whether such jobs are for RNs only or are for RNs, RPNs and

A screenshot of a Facebook post with several comments. The comments are as follows:

- Roxanne Marshall** Thanks for supporting us! 😊 it is always a battle with BCNU.  
Like · Reply · Message · 4 · February 5 at 11:04am
- Audrey MacMillan** I thought this issue was settled years ago. What derailed it? Maureen Whalen and I fought hard at bargaining and won that battle for our Rpn's  
Like · Reply · Message · 6 · February 5 at 12:37pm
- Sharon Evans** What part of "association" does BCNU not understand!? To all my young colleagues: watch carefully and don't let yourselves be bulldozed! a Former RPN Chief Steward.  
Like · Reply · Message · 7 · February 5 at 1:16pm
- Lynn Ottoson** Thanks to HSA for standing up for our rights 😊  
Like · Reply · Message · 8 · February 5 at 1:53pm
- Lorna Clutterham** BCNU is begging for RPN's to join them but for what? Only our money and numbers. Boo hiss BCNU . Thank you HSA.  
Like · Reply · Message · 8 · February 5 at 2:29pm
- Lila Mah** Good work. When will BCNU work together for the betterment of the workplace.  
Like · Reply · Message · 10 · February 5 at 3:07pm
- Kathy Green** Is this not a bullying tactic? What happened to following work safe's anti bully policy? Thank you HSA.  
Like · Reply · Message · 7 · February 5 at 7:07pm
- Jodi George** Wonderful  
Like · Reply · Message · 2 · February 6 at 8:10am
- Bea McConnell Rutledge** Awesome news.  
Like · Reply · Message · 2 · February 6 at 10:04am
- Susan Spratt** Brilliant.  
Like · Reply · Message · 2 · February 6 at 12:31pm
- Debra McLaren** Yes as always HSA protects RPNS ..once again BCNU shows who they really care about ...stand together !!!  
Like · Reply · Message · 3 · February 7 at 10:07am
- Janice Morrison** Great news for a great team. Way to go HSA  
Like · Reply · Message · 2 · February 7 at 4:35pm

JOIN THE COMMUNITY AT FACEBOOK/HSABC

After the BC government announced new permanent nursing jobs in January, RPN members of HSA were at first encouraged to contact the BC Nurses' Union – and provide personal contact information – if they wanted to apply for the positions.

LPNs and whether it only applies to members of BCNU.

To be clear, the announcement was not for newly-negotiated jobs. The Nurses Bargaining Association collective agreement finalized in 2012 called for the creation of 2125 full time equivalent positions by March 31, 2016. The 1600 jobs announced recently are a part of that agreement.

HSA is advocating strongly that positions offered will be based on most pressing needs. HSA continues to monitor the agreement to ensure that mental health services are given a fair share of much-needed jobs to meet the growing challenges in mental health.

If you are an RPN and member of HSA, and wish to apply for any of the new jobs, send your application directly to HSA at [rpnjobs@hsabc.org](mailto:rpnjobs@hsabc.org) so that your union can support you.

## NBA RESUMES NEGOTIATIONS

Representatives of the Nurses Bargaining Association, including HSA representatives, returned to the bargaining table February 11. Talks continue as this magazine goes to print in late March.

RPN and Haro Park Lodge Chief Steward Larry Bryan is representing HSA RPNs, along with senior labour relations officer Dani Demetlika.

More than 800 registered psychiatric nurses are covered by the provincial Nurses Collective Agreement. The BC Nurses Union is the lead union of the Nurses Bargaining Association. The collective agreement expired in March 2014.

HSA representatives are proposing to secure improvements in violence prevention training and procedures, specialty nursing, and workload.

Check [hsabc.org](http://hsabc.org) for the latest updates.

## RPN ENGAGEMENT COMMITTEE KICKS OFF WITH APRIL ASSEMBLY

HSA has launched the RPN Outreach and Engagement committee with resources and staff support to help increase awareness of the collective agreement rights and benefits for all HSA RPN members.

To kick off this new initiative, HSA is holding two days of workshops for RPNs on April 20th and 21st at the HSA office in New Westminster. These workshops are open to all HSA RPN members.

- Day 1, the Assembly of Registered Psychiatric Nurses, on Wednesday, April 20, will focus on workplace violence and safety initiatives, including violence reporting procedures and workplace safety pilot project case studies.
- Day 2, RPN Member Engager Training, on Thursday, April 21, will focus on outreach and education initiatives, including member mobilizing, PRFs, education opportunities and nurses' collective agreement interpretation.

Registration is available at [hsabc.org](http://hsabc.org) and interested members are encouraged to register for one or both days that are of interest.

Union paid leave will be provided for members, with travel and accommodation expenses covered for members attending from out of town. If the workshop falls on a regularly scheduled day of work, members should request union paid leave through their employer.

Additional supports to address barriers to participation are available for members requiring child or dependent care.

If you have questions about the workshops or require more information on registering please contact Jonny at the HSA Office by e-mail at [jsopotiuik@hsabc.org](mailto:jsopotiuik@hsabc.org) or by text/phone at 778-866-0542.



STEWARDS AND BOARD MEMBERS FROM SITES AROUND THE PROVINCE GATHERED TO DISCUSS CONCERNS AND BRAINSTORM SOLUTIONS AT A NUMBER OF FOCUS GROUPS HELD IN FEBRUARY

# STEWARDS PLAN SUPPORT FOR STEWARDS

IT'S OFTEN SAID THAT STEWARDS ARE THE BACKBONE OF OUR UNION, AND LIKE ANY BACKBONE, IT WORKS BEST WITH ADEQUATE SUPPORT.

As part of the 2020 Strategic Plan, and following discussions at recent conventions, HSA stewards have been meeting to talk about the work they do, the challenges they face, and the resources they need to do their important work.

## **DIFFERENT CONCERNS, DIFFERENT ROLES**

At regional meetings last

fall, stewards were asked to identify their main challenges and discuss possible solutions. Concerns varied from one worksite to the next, because large sites have different issues than smaller ones, and sites with a more diverse mix of professions face demands which are very different from those at sites with a more homogenous blend of members. Some stewards expressed concerns about having the confidence in their knowledge and abilities to help members with complex labour relations problems. Some said they needed a more robust and effective steward team to be able to meet the needs of their members. Others said they

needed more time and more tools to advocate effectively for them.

Overall, stewards said they are dealing with challenges concerning:

- time
- education and guidance in helping members
- help to spread the work around
- technology solutions
- strategies to organize members

Stewards also identified the varying roles they are expected to play from one day to the next. Because stewards often



“Stewards play a critical role in protecting the rights of HSA members and in maintaining a spirit of solidarity and confidence in our union. Becoming a steward is not only one of the greatest contributions you can make to your union, but it may be one of the most rewarding experiences you will ever have.”

HSA Steward’s Manual

deal with members who may not attend HSA meetings or read information circulated by email, social media, the web site and the bulletin boards, stewards often find they are the only contact these members have with their union. To do their jobs effectively, stewards say they are called upon to serve in the following roles:

- an organizer who helps members deal with problems as a united group
- a problem solver who is the first person members turn to when confronted with a safety issue or contract question
- an educator and communicator who informs members about their collective agreement rights and recent developments relating to their workplace
- a workplace leader who acts as the face of the union in the worksite and must not be afraid to speak up to management

### **BRAINSTORMING IN FOCUS SESSIONS**

In February, stewards from small, medium and large-sized worksites gathered to discuss these insights at a series of focus groups with staff and regional directors. Discussion touched on education and new technological tools, shared tactics for motivating members and organizing support teams, and how stewards would be supported in an ideal world. Participants sketched out a draft plan to help develop effective support for steward teams facing these and many other issues.

### **NEXT STEPS**

A full report on the the findings to date, along with a draft proposal for new technology resources that are currently being developed to help stewards do their important work, will be presented to delegates for discussion at convention in May.



WITH MRI TECHNOLOGISTS STILL IN SHORTAGE, NEW INVESTMENT IN MRI TESTING WON'T BE ABLE TO REDUCE WAIT TIMES FOR THE PUBLIC

# SHORTAGES WILL LIMIT NEW FACILITIES

HSA WELCOMES PLANS TO INVEST IN NEW AND UPGRADED HEALTH CARE FACILITIES AND HOPES TO WORK WITH THE PROVINCIAL GOVERNMENT ON A PLAN TO DEAL WITH THE SHORTAGE OF HEALTH SCIENCE PROFESSIONALS NEEDED TO STAFF THEM.

The BC government's budget, released in February, specifies investments over the next three years to support new major construction projects and upgrading of health facilities, medical and diagnostic equipment and information management and technology systems at facilities in Kamloops, Vancouver, Penticton, Comox Valley and Campbell River.

"New buildings are only as good as the people who work in

them," said Val Avery, president of Health Sciences Association of BC. "We're very pleased the provincial government is planning to invest in new buildings, beds and equipment over the next three years, but we're concerned we won't achieve the full impact of this investment if existing facilities are already having a hard time hiring enough health science professionals needed to deliver health services.

"For example, the government recently announced plans to increase funding for MRI scans at public hospitals. The funding could help decrease wait times for thousands of British Columbians, but a shortage of technologists will make this harder. And that's just one health science profession. Hospitals around the province are already struggling to fill vacancies for ultrasonog-

**"We're concerned we won't achieve the full impact of this investment if existing facilities are already having a hard time hiring enough health science professionals needed to deliver health services."**

raphers, physiotherapists and occupational therapists.

"We look forward to working with the government on a plan to train and hire the many health science professionals needed not only for these new facilities, but to fill hundreds of critical vacancies at existing facilities around the province," Avery said.

# RECOMMENDATIONS TO IMPROVE CHILD AND YOUTH MENTAL HEALTH MUST BE IMPLEMENTED

THE 23 RECOMMENDATIONS MADE BY THE BC LEGISLATURE'S COMMITTEE ON CHILDREN AND YOUTH ARE CRITICAL TO ADDRESSING THE CURRENT CRISIS IN MENTAL HEALTH SERVICES FOR CHILDREN AND YOUTH.

The independent committee, comprised of MLAs from both government and opposition parties, unanimously supported the recommendations in a comprehensive report released January 17. Recommendations include:

- providing funding for adequate early intervention programs for common and preventable disorders in children
- improving the quality of first contact in emergency departments by employing registered psychiatric nurses more broadly
- establishing targets to ensure children and youth at risk of behavioural, emotional or mental health issues are assessed within 30 days and begin receiving treatment within the next 30 days

"HSA members who support children and youth with mental health disorders constantly tell us of the lack of resources and gaps in services, and the tragic impact this has on their patients and clients," said HSA president Val Avery.

**"HSA members who support children and youth with mental health disorders constantly tell us of the lack of resources and gaps in services, and the tragic impact this has on their patients and clients."**

"Children and their families are left struggling to navigate a complex and fragmented system at a time when many of them are in crisis."

HSA submitted a report to the Committee which included input from members working in the sector.

"We're pleased to see that the Committee report reflects the reality our members deal with while trying to support their patients and clients, and that the Committee's recommendations address many of their concerns," said Avery.

HSA supports Committee recommendations such as a new Ministry for Mental Health and a "one child, one file" approach, in order to improve integration and coordination of services that are currently provided through several different ministries and agencies.

Focusing on early intervention, giving priority to children, youth and young adults with special

needs, and ensuring there are enough health professionals such as child and adolescent psychologists and registered psychiatric nurses, are also key Committee recommendations that must be implemented.

"There have been a series of reports since 2003 highlighting the critical need to improve mental health services for children and youth in BC," said Avery. "It's well past time to take action."

HSA represents health professionals working in mental health and addictions in acute and community health care settings throughout the province. Members include child and youth mental health support workers, psychologists, counsellors, social workers, early childhood education specialists, registered psychiatric nurses and many other health professionals who work in the field.

# BENEFITS PROTECTED DURING TRANSITION TO JOINT TRUST

HEALTH SCIENCE PROFESSIONALS WILL SOON HAVE GREATER CONTROL OVER THEIR BENEFITS THANKS TO A NEW JOINT BENEFITS TRUST.

The trustees will become part of an innovative and progressive approach that gives them the flexibility to design a benefit structure that aligns with members' needs. It is fitting that health science professionals were first to sign onto this initiative, given how central innovation is in their day to day practice.

"Having direct input and control over the design of our members' benefits will ensure that the Health Science Professionals Bargaining Association has the flexibility to direct resources towards new and innovative health benefits in a manner that ensures our health benefits dollars are being best allocated to suit our members' needs," said Jeanne Meyers, HSPBA's chief negotiator and Executive Director of Legal Services and Labour Relations for Health Sciences Association of BC.

The Joint Health Sciences Benefit Trust (JHSBT) was negotiated as part of the 2014-2019 HSPBA collective agreement to protect and enhance members' benefits. With the transition to the JHSBT, members' and employers' interests will be represented by an equal number of HSPBA and Health Employers Association of BC trustees.

**Once the Joint Health Sciences Benefit Trust is fully operational in 2017, trustees will be looking for opportunities to further enhance and improve health benefits for HSPBA members.**

Once the JHSBT is fully operational, trustees will be looking for opportunities to increase alignment between the plan's structure and what members need.

"HEABC embraces the opportunity to partner with the HSPBA as benefit trustees," said Adrienne Hook, Executive Director, Strategic Negotiations and Benefits Administration at HEABC. "Ultimately, we want employees to feel they are getting value for the money spent on benefits and to be part of the decision-making necessary to sustain benefit plans in the future."

The HSPBA/HEABC Working Group tasked with setting up the JHSBT has made substantial headway on a long list of priorities in advance of the anticipated hand-over of responsibility to the joint trust on April 1. Key documents for the new trust are in place and the work of companion agreements are nearing completion as the Working Group moves closer to concluding the formal negotiation stage which began in 2014.

In the interest of due diligence, the trustees will be putting out a request for proposals (RFP) for

a third party administrator and benefit provider.

Respondents to the RFP will be reviewed carefully and the chosen provider will start April 1, 2017. The Healthcare Benefit Trust (HBT) will continue to be the service provider for the first year.

There will be no change to benefits for members covered by the HSPBA collective agreement during the transition period. Once the Joint Health Sciences Benefit Trust is fully operational, trustees will be looking for opportunities to further enhance and improve health benefits for HSPBA members.

The HSPBA/HEABC Working Group has approached this project in a professional and collaborative manner to ensure the smoothest transition possible and to identify and resolve problems ahead of time. This due diligence is the foundation for a new partnership that reflects the importance of these benefits for the members/employees and their families. It will ensure the continuance of quality benefits and opens the door for exciting innovation in plan design.

## Q AND A ON THE JOINT HEALTH BENEFITS TRUST

**Recent updates on the Joint Benefit Trust suggest it will be “fully operational” sometime in the future. What does that mean?**

What it means is there is still work to do before the joint trust agreement (JTA) – the agreement that governs the Joint Health Sciences Benefit Trust (JHSBT) – can be fully executed. While that process unfolds, the status quo remains and the current benefit plan continues unchanged. So while the April 1, 2016 date is still significant, the parties to the JHSBT (Health Science Professional Bargaining Association and Health Employers Association of BC through the working group) have agreed that the “go live” date will be delayed until such time as the JTA is ready to be fully implemented.

**Is there a particular reason for the decision to delay implementation?**

The primary reason is the work is simply not complete. The HSPBA/HEABC working group were working off the timetable agreed to at bargaining, which was a best guess estimate of

the time needed to complete the work. That timetable proved to be too ambitious and didn't anticipate some of the complexities involved in dealing with multiple parties contractually bound to the current benefit arrangements. The working group determined that more time was needed to ensure that aggregate data on general usage and costs needed by the new trust was transferred properly. Consequently, that work will need to continue throughout 2016 to meet the adjusted timelines and allow the JHSBT to become fully operational.

**Are you optimistic that the work will be completed, and if so why?**

Yes. Notwithstanding the delay, the working group has accomplished a great deal over the last year. In addition to completing the joint trust agreement, a lot of progress has been made on the funding agreement that will provide the revenue stream for benefits until the current collective agreement expires in 2019. Another important accomplishment was establishing the Members' Premium Trust

Account (MPTA) and securing those assets exclusively for the benefit of members. The MPTA was the result of strong market returns generating surplus in the long term disability account; a fact that came to light during the early stages of the joint trust negotiation.

With this foundational work largely behind us, the focus in the coming year will be to sort out the mechanics of the implementation and conclude contractual agreements with existing service providers; and to market for other services that the JHSBT may require. This work will be performed by the trustees (mostly working group members) who will have the authority to execute contracts or contract services on behalf of the JHSBT. The goal will be to transition to the new trust arrangement in the most seamless way possible, and get on with implementing a successful joint benefit program on behalf of HSPBA members. HSA is confident that joint administration of the benefit plans is the way to go and it will over time produce positive results just like it has with the pension plan.

## PENSION INCOME SPENDING BENEFITS BC COMMUNITIES

Public sector retirees supported \$1.66 billion in provincial GDP and 31,000 jobs in 2014 by spending their pensions locally, according to research conducted for the Municipal Pension Board of Trustees.

Assessing the Economic Impacts of Pension-Income Spending in British Columbia indicates that public sector retirees spend their pension income where they live, which benefits both their community and the BC economy. In

2014, BC public sector pension plans paid in excess of \$3 billion in payments to plan members and their beneficiaries, and 97 per cent of those were BC residents.

Total government tax revenue also got a \$310 million boost from public sector pension payments made the same year, according to the report.

Additional findings include:

- Pension-income spending has as strong an economic

impact on provincial GDP as the forestry and logging industry.

- The Municipal Pension Plan serves more than 299,000 members and their employers. Members and employers come from a variety of sectors across the province, including health, municipalities, school districts and others.

**If you have a question or concern about pensions, contact [dblatchford@hsabc.org](mailto:dblatchford@hsabc.org).**



FOURTEEN WOMEN, INCLUDING BC FEDERATION OF LABOUR PRESIDENT IRENE LANZINGER AND REPRESENTATIVES OF A NUMBER OF UNIONS, INCLUDING HSA BOARD MEMBER ANNE DAVIS, MET WITH OPPOSITION MLAS AND CABINET MINISTERS IN VICTORIA

# LOBBY GROUP RAISES WOMEN'S ISSUES

REPORT ON B.C. FEDERATION OF LABOUR LOBBY IN VICTORIA

MARCH 7 AND 8, 2016

**BY ANNE DAVIS  
DIRECTOR, REGION 1**

The BC Federation of Labour's annual government lobby day was scheduled for International Women's Day this year. So it was decided that it should be carried out by the Women's Rights Committee.

Participants focused on three important issues: child care, women's economic security (\$15 minimum wage) and the lack of "rape kits" allowing full forensic exams in all B.C. hospitals following a sexual assault - an issue brought forward by HSA following discussions at last year's convention (see page 22).

Building on the comprehensive government relations training provided to many participants through HSA's Constituency Liaison program, we held focused and productive meetings with

opposition members Andrew Weaver, Shane Simpson, Judy Darcy, Maurine Karagianis, and Doug Donaldson, who were very interested and supportive. We also met with cabinet ministers Shirley Bond and Stephanie Cadieux. Minister Bond was interested in the rape kit issue and was sympathetic to the child care issue as her son and daughter-in-law have difficulty finding affordable daycare.

On the evening of March 7, we attended a Union Sisters dinner, co-sponsored by the BC Fed and the Victoria Labour Council. We had a panel presentation of the three lobby issues during which I presented on rape kits.

On March 8, International Women's Day, our group held a press conference on the steps of the legislature which was attended by CTV, Global and representatives of various print media. Following the press conference, we attended question period where we were introduced by NDP MLA's and two questions, plus two supple-

mental questions, related to the rape kit issue were asked by Maurine Karagianis and Jennifer Rice. Terry Lake responded that sexual assault exams are performed at all B.C. hospitals.

At a meeting on March 9, the Women's Rights Committee passed a motion asking the B.C. Fed to write a letter to Minister Lake correcting the misinformation, requesting that accurate information be brought to the attention of the house and that proper services be implemented around the province.

Lobby days have proven to be a very useful exercise and it has been suggested that there be an annual BC Fed women's lobby in Victoria. It was felt that the combination of two longstanding issues (child care and minimum wage) with a new issue (rape kits) was helpful in attracting attention to all three issues. I'm pleased that HSA was part of this important initiative and hope we will continue to participate in the future.



(L-R) DENA ELLERY (CMHA), BRENDAN SHIELDS, CHARLOTTE NANALAL, DAVID DURNING

# HEROES IN THE WORKPLACE

“THEY SEE A NEED, THEY FEEL COMPASSION, AND THEY ACT.”

THE CANADIAN MENTAL HEALTH ASSOCIATION'S ANNUAL BOTTOM LINE CONFERENCE BRINGS TOGETHER WORKERS, EMPLOYERS AND RESEARCHERS TO FIND WAYS OF IMPROVING MENTAL HEALTH IN CANADIAN WORKPLACES.

This year, HSA sponsored two members to attend the conference held recently in Vancouver.

Charlotte Nanalal, a radiation therapist at the Fraser Valley Cancer Centre and Brendan Shields, a music therapist at Richmond Hospital, were chosen to attend through their participation in an essay contest organized by HSA's Occupational Health and Safety Committee. HSA members were asked to write on the theme of this year's conference, which was "Heroes in the workplace: Stories from

the champions of change".

Here are some excerpts from Brendan's and Charlotte's submissions.

## BRENDAN

"There are other heroes in our midst that I call the quiet heroes. They are the ones that step up and do the hard work of making our workplaces psychologically healthy and safe every day... They are the OHS stewards who keep bringing up the same safety issue at meetings, even though the employer minimizes it and pretends they do not see it. They are the members who see a fellow brother or sister struggling at work and reaches out to them. They are the members who mentor a new graduate and take them under their wing through those first days of their working life.

...They see a need, they feel compassion, and they act. And

no matter how small this action is it moves us all forward. Heroes are all around us, and the possibility of being one is just one act away..."

## CHARLOTTE

"I believe that in its role of advocating for members, the labour movement will be bringing mental health issues to the forefront of discussion on labour relations. The presence of occupational health and safety stewards on the front line, at every site, provides unions with a direct link to their members. The ability of the steward to act as a liaison between members and staff ensures that best practices can be communicated and that members have advocacy that is accessible. It is this advocacy that will raise the standard of how mental health is supported in the workplace."

If you have a question or concern about occupational health and safety, contact [ddurning@hsabc.org](mailto:ddurning@hsabc.org).



# MARJAN SZLIVKA

PHYSIOTHERAPIST HELPING PROTECT ALL PROFESSIONS

**BY LAURA BUSHEIKIN**

## IT'S NOT MY BUSINESS.

That's what Marjan Szlivka thought when she first heard that registered psychiatric nurses within HSA were being raided by BCNU.

In her work as a physiotherapist at Eagle Ridge Hospital in Port Moody, Szlivka didn't work with RPNs, and their situation wasn't on her radar.

But once she learned more, she not only got concerned, she got active. She realized that the core issue was the integrity of HSA as a unique health care professionals' union, and she knew this was something she wanted to defend.

"From the very beginning, HSA has represented a very large number of extremely diverse professions and it does that very, very well. Also, HSA is solutions-driven, collaborative, and positive. It's not afraid to go up against the employer or the government when needed, but this is not done in an antagonistic way; rather, it's about looking for a path forward.

"Another strength of HSA is in how it represents professions in a way that highlights the value of all members of the healthcare team," says Szlivka.

Szlivka joined a campaign to phone RPNs on behalf of HSA to offer support, explain the legalities of what was happening, and find out if there were any gaps in the services HSA was

offering them.

"Part of what upsets me is that HSA members' safety has been put at risk. BCNU organizers have come on to psychiatric units and interfered with RPNs providing care, and have bothered HSA RPNs outside of the workplace," says Szlivka.

"What really frustrates me too, is that the raiding actions by BCNU have the potential to sour otherwise very good working relationships between HSA and BCNU members - we are all members of multidisciplinary teams who work together collaboratively to provide excellent patient care, each respecting each other's individual skills and roles. Anything that has the potential to sour these relationships is not good."



# “THE RAIDING ACTIONS BY BCNU HAVE THE POTENTIAL TO SOUR OTHERWISE VERY GOOD WORKING RELATIONSHIPS BETWEEN HSA AND BCNU MEMBERS”

This wasn't Szlivka's first foray into workplace advocacy. In Dublin, where she trained and spent the first seven years of her career, Szlivka was very active in her professional organization. She got involved in HSA four years ago as an occupational health and safety steward. Last year she joined the Constituency Liaison program, which trains and supports HSA members to meet regularly with their MLAs to discuss public policy issues of importance to the HSA membership. Most recently, she's become a steward.

Szlivka is full of encouragement for anyone considering getting involved with HSA. "If someone taps you on the shoulder, say yes! You will be supported. The education provided by HSA is second to none. It really sets you up for whatever role you take on. And it's ongoing. There's always someone you can phone or email with a question. You are not alone."

It's important for all HSA members to be aware of what the

union does, not just at the workplace but on multiple political and social levels, she says. "Going to convention really opened my eyes to the full scope and breadth of what HSA does. For instance, I learned how HSA works with government through the Constituency Liaison program to connect members to MLAs with a focussed, wide-reaching message. This has a real impact on the decisions government makes. And there are committees addressing a whole range of social justice issues."

Union activism comes naturally to Szlivka. Her family isn't political in any organized sense, she says, but her father was an active volunteer and her mother is still very involved in her community. "You have a responsibility for making your community better. It's just one of those things that you do - you get involved."

Her career choice, on the other hand, took her a bit by surprise. "I'm a failed vet!" she explains with a laugh. "I grew up on a

farm, and from the time I was 12 I just knew I wanted to be a vet."

But life sometimes has a way of taking us not where we want to go, but where we belong.

"My intention when I got into physio was to work with animals, not people. But once I started my clinical placements I realized that this was what I was meant to do. What I love about being a physio is the relationships of trust and understanding that you build with your patients. The way you help them through their journey, wherever that might be.

"It's the same reason I enjoy my work with HSA - it's about building relationships and helping people who need practical support in the workplace or working towards change on a larger scale. I just know I'm in the right place."

That's good news, not just for her patients, but for the membership of HSA, which has in Szlivka a dedicated and effective advocate.



TRINA NGUYEN IS A PHARMACIST WORKING IN LANGLEY

# SPEAK UP

IN APRIL 2015, AT A WORKSHOP PRIOR TO HSA'S LAST CONVENTION, TRINA NGUYEN HEARD SOMETHING THAT STARTLED HER.

"It was a workshop on HSA's work to raise awareness around domestic violence," says Nguyen," and someone told a story about a young woman who was afraid she might have been sexually assaulted after having too much to drink. She went to St. Paul's Hospital, but they told her they didn't have rape kits. And that she should go to Vancouver General Hospital.

"That was it. No support. No protocol. No procedure. Everyone was shocked to hear it."

Nguyen asked around, and was told that rape kits are completely unavailable at a great number of sites across BC.

"Everyone I talked to about it was deeply concerned. And while it's not something that we can change overnight – it takes a lot of resources and training to make a change like this – I thought the least we could do was raise awareness of the problem."

That's when another participant told her to write an emergency resolution for the convention.

"So I spoke with a member of the resolutions committee, and she helped me write it. The committee later passed it.

"This is a perfect example of why

I am involved in this union," she says. "As an individual, I spent some time making calls about this problem, and eventually I hit a dead end. But I'm just one person. With the union behind it, with all of us acting together, I know we'll get further. We might make a real change.

"I know some people come to convention and think we're just going through the motions," she adds. "But everyone should know that our union takes our resolutions very seriously. They're an opportunity for us to come together, as professionals, and take action not just on things that affect us in the workplace, but things that happen to ordinary people around the province."



**Name:** Leila Lolua

**What you would do if you won the lottery:** Hop on my bike

**Job title and department:** Senior Labour Relations Officer - Education

**What you actually do, in your own words:** Facilitate member engagement and help members understand their contract and ways to improve working conditions

**Why this matters:** Knowledge and transformative change inspires others to work towards making progressive change

**Secret talent unrelated to job:** Serious procrastination followed by manic tendencies

**Person you most admire:** My dad. An incredible human who overcame unbelievable adversity

**At HSA since:** 1993

**Job before HSA:** Renal Dietitian

**Scariest situation you've ever been in:** Alone on my bike in a deserted hostel

**Interesting thing you did to help a member in the last week:** Helped a member untangle labour relations and human rights issues

**Plans for the weekend:** Evening cross country ski and morning soccer game

**Last book read:** The Light Between Oceans by M. L. Stedman

**Good or bad:** Good

**Why:** Historical romance with ethical and heart wrenching twists



# HEALTH SCIENCES ASSOCIATION

## The union delivering modern health care

HSA's Board of Directors is elected by members to run HSA between Annual Conventions. Members should feel free to contact them with any concerns.

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